

County: Rock  
 MERCY MANOR TRANSITION CENTER  
 P.O. BOX 5003

Facility ID: P310

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JANESVILLE 53547 Phone:(608) 756-6050  
 Operated from 12/30 To 12/31 Days of Operation: 2  
 Operate in Conjunction with Hospital? Yes  
 Number of Beds Set Up and Staffed (12/31/02): 28  
 Total Licensed Bed Capacity (12/31/02): 28  
 Number of Residents on 12/31/02: 4

Ownership: Non-Profit Corporation  
 Highest Level License: Skilled  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? No  
 Average Daily Census: 4

| Services Provided to Non-Residents |    | Age, Sex, and Primary Diagnosis of Residents (12/31/02) |       |            |       | Length of Stay (12/31/02)       |  | %     |
|------------------------------------|----|---|-------|------------|-------|---------------------------------|--|-------|
| Home Health Care                   | No | Primary Diagnosis                                       | %     | Age Groups | %     | Less Than 1 Year                |  | 100.0 |
| Supp. Home Care-Personal Care      | No | -----   |       | -----      |       | 1 - 4 Years                     |  | 0.0   |
| Supp. Home Care-Household Services | No | Developmental Disabilities                              | 0.0   | Under 65   | 25.0  | More Than 4 Years               |  | 0.0   |
| Day Services                       | No | Mental Illness (Org./Psy)                               | 25.0  | 65 - 74    | 0.0   | -----                           |  | ----- |
| Respite Care                       | No | Mental Illness (Other)                                  | 0.0   | 75 - 84    | 50.0  |                                 |  | 100.0 |
| Adult Day Care                     | No | Alcohol & Other Drug Abuse                              | 0.0   | 85 - 94    | 0.0   | *****                           |  | ***** |
| Adult Day Health Care              | No | Para-, Quadra-, Hemiplegic                              | 0.0   | 95 & Over  | 25.0  | Full-Time Equivalent            |  |       |
| Congregate Meals                   | No | Cancer  | 0.0   | -----      | ----- | Nursing Staff per 100 Residents |  |       |
| Home Delivered Meals               | No | Fractures   | 25.0  |            | 100.0 | (12/31/02)                      |  |       |
| Other Meals                        | No | Cardiovascular  | 0.0   | 65 & Over  | 75.0  | -----                           |  | ----- |
| Transportation                     | No | Cerebrovascular   | 0.0   | -----      | ----- | RNs                             |  | 50.0  |
| Referral Service                   | No | Diabetes  | 50.0  | Sex        | %     | LPNs                            |  | 0.0   |
| Other Services                     | No | Respiratory   | 0.0   | -----      | ----- | Nursing Assistants,             |  |       |
| Provide Day Programming for        |    | Other Medical Conditions                                | 0.0   | Male       | 50.0  | Aides, & Orderlies              |  | 15.0  |
| Mentally Ill                       | No | -----   | ----- | Female     | 50.0  |                                 |  |       |
| Provide Day Programming for        |    | 100.0   | ----- | -----      | ----- |                                 |  |       |
| Developmentally Disabled           | No |   |       |            | 100.0 |                                 |  |       |

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#### Method of Reimbursement

| Medicare<br>(Title 18) |     |       | Medicaid<br>(Title 19) |     |     | Other               |     |     | Private<br>Pay      |     |       | Family<br>Care      |     |     | Managed<br>Care     |     |     | Total<br>Resi-<br>dents | %<br>Of<br>All |                     |
|------------------------|-----|-------|------------------------|-----|-----|---------------------|-----|-----|---------------------|-----|-------|---------------------|-----|-----|---------------------|-----|-----|-------------------------|----------------|---------------------|
| Level of Care          | No. | %     | Per<br>Diem<br>(\$)    | No. | %   | Per<br>Diem<br>(\$) | No. | %   | Per<br>Diem<br>(\$) | No. | %     | Per<br>Diem<br>(\$) | No. | %   | Per<br>Diem<br>(\$) | No. | %   |                         |                | Per<br>Diem<br>(\$) |
| Int. Skilled Care      | 0   | 0.0   | 0                      | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Skilled Care           | 1   | 100.0 | 268                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 3   | 100.0 | 220                 | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 4              | 100.0               |
| Intermediate           | --- | ---   | ---                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Limited Care           | --- | ---   | ---                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Personal Care          | --- | ---   | ---                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Residential Care       | --- | ---   | ---                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Dev. Disabled          | --- | ---   | ---                    | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Traumatic Brain Inj    | 0   | 0.0   | 0                      | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Ventilator-Dependent   | 0   | 0.0   | 0                      | 0   | 0.0 | 0                   | 0   | 0.0 | 0                   | 0   | 0.0   | 0                   | 0   | 0.0 | 0                   | 0   | 0.0 | 0                       | 0              | 0.0                 |
| Total                  | 1   | 100.0 |                        | 0   | 0.0 |                     | 0   | 0.0 |                     | 3   | 100.0 |                     | 0   | 0.0 |                     | 0   | 0.0 |                         | 4              | 100.0               |

| Admissions, Discharges, and Deaths During Reporting Period |       |  |  |  |  | Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02 |             |                         |                                      |                     |
|--|-------|--|--|--|--|--|-------------|-------------------------|--------------------------------------|---------------------|
|  |       |  |  |  |  | -----  |             |                         |                                      |                     |
| Percent Admissions from:                                   |       |  |  |  |  | Activities of  | %           | % Needing Assistance of | % Totally                            | Total               |
|  |       |  |  |  |  | Daily Living (ADL)   | Independent | One Or Two Staff        | Dependent                            | Number of Residents |
| Private Home/No Home Health                                | 0.0   |  |  |  |  |  | 25.0        | 25.0                    | 50.0                                 | 4                   |
| Private Home/With Home Health                              | 0.0   |  |  |  |  | Bathing  | 25.0        | 25.0                    | 25.0                                 | 4                   |
| Other Nursing Homes  | 100.0 |  |  |  |  | Dressing   | 50.0        | 25.0                    | 50.0                                 | 4                   |
| Acute Care Hospitals                                       | 0.0   |  |  |  |  | Transferring   | 25.0        | 25.0                    | 50.0                                 | 4                   |
| Psych. Hosp.-MR/DD Facilities                              | 0.0   |  |  |  |  | Toilet Use   | 50.0        | 0.0                     | 50.0                                 | 4                   |
| Rehabilitation Hospitals                                   | 0.0   |  |  |  |  | Eating   | 75.0        | 25.0                    | 0.0                                  | 4                   |
| Other Locations  | 0.0   |  |  |  |  | *****  |             |                         |                                      |                     |
| Total Number of Admissions                                 | 4     |  |  |  |  | Continence   |             | %                       | Special Treatments                   | %                   |
| Percent Discharges To:                                     |       |  |  |  |  | Indwelling Or External Catheter  |             | 0.0                     | Receiving Respiratory Care           | 25.0                |
| Private Home/No Home Health                                | 0.0   |  |  |  |  | Occ/Freq. Incontinent of Bladder   |             | 50.0                    | Receiving Tracheostomy Care          | 0.0                 |
| Private Home/With Home Health                              | 0.0   |  |  |  |  | Occ/Freq. Incontinent of Bowel   |             | 50.0                    | Receiving Suctioning                 | 0.0                 |
| Other Nursing Homes  | 0.0   |  |  |  |  |  |             |                         | Receiving Ostomy Care                | 0.0                 |
| Acute Care Hospitals                                       | 0.0   |  |  |  |  | Mobility   |             |                         | Receiving Tube Feeding               | 0.0                 |
| Psych. Hosp.-MR/DD Facilities                              | 0.0   |  |  |  |  | Physically Restrained  |             | 0.0                     | Receiving Mechanically Altered Diets | 50.0                |
| Rehabilitation Hospitals                                   | 0.0   |  |  |  |  |  |             |                         | Other Resident Characteristics       |                     |
| Other Locations  | 0.0   |  |  |  |  | Skin Care  |             |                         | Have Advance Directives              | 25.0                |
| Deaths   | 0.0   |  |  |  |  | With Pressure Sores  |             | 0.0                     | Medications                          |                     |
| Total Number of Discharges                                 |       |  |  |  |  | With Rashes  |             | 0.0                     | Receiving Psychoactive Drugs         | 50.0                |
| (Including Deaths)   | 0     |  |  |  |  |  |             |                         |                                      |                     |

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Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities  
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|  | This Facility | Other Hospital-Based Facilities |       | All Facilities |       |
|--|---------------|---------------------------------|-------|----------------|-------|
|  | %             | %                               | Ratio | %              | Ratio |
| Occupancy Rate: Average Daily Census/Licensed Beds   | 14.3          | 87.4                            | 0.16  | 85.1           | 0.17  |
| Current Residents from In-County                     | 75.0          | 84.3                            | 0.89  | 76.6           | 0.98  |
| Admissions from In-County, Still Residing            | 75.0          | 15.2                            | 4.94  | 20.3           | 3.69  |
| Admissions/Average Daily Census                      | 100.0         | 213.3                           | 0.47  | 133.4          | 0.75  |
| Discharges/Average Daily Census                      | 0.0           | 214.2                           | 0.00  | 135.3          | 0.00  |
| Discharges To Private Residence/Average Daily Census | 0.0           | 112.9                           | 0.00  | 56.6           | 0.00  |
| Residents Receiving Skilled Care                     | 100.0         | 91.1                            | 1.10  | 86.3           | 1.16  |
| Residents Aged 65 and Older                          | 75.0          | 91.8                            | 0.82  | 87.7           | 0.86  |
| Title 19 (Medicaid) Funded Residents                 | 0.0           | 65.1                            | 0.00  | 67.5           | 0.00  |
| Private Pay Funded Residents                         | 75.0          | 22.6                            | 3.32  | 21.0           | 3.56  |
| Developmentally Disabled Residents                   | 0.0           | 1.5                             | 0.00  | 7.1            | 0.00  |
| Mentally Ill Residents                               | 25.0          | 31.3                            | 0.80  | 33.3           | 0.75  |
| General Medical Service Residents                    | 0.0           | 21.8                            | 0.00  | 20.5           | 0.00  |
| Impaired ADL (Mean)*                                 | 55.0          | 48.9                            | 1.12  | 49.3           | 1.12  |
| Psychological Problems                               | 50.0          | 51.6                            | 0.97  | 54.0           | 0.93  |
| Nursing Care Required (Mean)*                        | 9.4           | 7.4                             | 1.26  | 7.2            | 1.30  |